	n this information to identify your case:			
Debt	tor 1 Joseph N. Futch First Name Middle Name Last Name			
Debt				
(Spou	se if, filing) First Name Middle Name Last Name			
Unite	ed States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN			
Case	e number 19-50262-tjt			
(if kno			Check i	if this is an
			amende	ed filing
Off	icial Form 106Sum			
Sur	mmary of Your Assets and Liabilities and Certain Statistical Information		12	2/15
	s complete and accurate as possible. If two married people are filing together, both are equally responsible fo mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend			
	original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	cu sc	, iicaaic	s arter you me
Part	1: Summarize Your Assets			
		V	our as	ente
				what you own
1.	Schedule A/B: Property (Official Form 106A/B)			
	1a. Copy line 55, Total real estate, from Schedule A/B	(	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	;	\$	51,091.00
	1c. Copy line 63, Total of all property on Schedule A/B	,	\$	51,091.00
	<u> </u>	`	<b>-</b>	31,031.00
Part	2: Summarize Your Liabilities			
			our lia	<b>bilities</b> you owe
		A	inount	you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	:	\$	63,045.00
3.				
Э.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	,	\$	43,795.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	;	\$	39,870.00
	Your total liabilities	\$		146,710.00
		Ľ		
Part	3: Summarize Your Income and Expenses			
4.	Schedule I: Your Income (Official Form 106I)			
٦.	Copy your combined monthly income from line 12 of Schedule I	,	\$	5,117.00
5.	Schedule J: Your Expenses (Official Form 106J)			5 445 00
	Copy your monthly expenses from line 22c of Schedule J		\$	5,115.00
Part	4: Answer These Questions for Administrative and Statistical Records			
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?			
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur oth	ner sche	edules.
	■ Yes			
7.	What kind of debt do you have?			

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Case number (if known) 19-50262-tjt

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,191.00

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	43,795.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	22,023.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	65,818.00

ebtor 1	Joseph N. Futch				
	First Name	Middle	Name Last Name		
ebtor 2	Gwendolyn D. Fut	ch			
pouse, if filing)	First Name	Middle	e Name Last Name		
nited States	Bankruptcy Court for the:	EASTERN	DISTRICT OF MICHIGAN		
ase number	19-50262-tjt				☐ Check if this is a amended filing
fficial E	iorm 106 \ /P				amended illing
	i <u>orm 106A/B</u> I <b>le A/B: Prop</b> e	erty			12/15
Do you own o			her Real Estate You Own or Have an Interest In any residence, building, land, or similar property?		
_					
	Where is the property?				
☐ Yes.	Where is the property?		What is the property? Check all that apply	the amount of any secu	claims or exemptions. Put ured claims on Schedule D:
1	ss, if available, or other description		What is the property? Check all that apply  ☐ Single-family home ☐ Duplex or multi-unit building	the amount of any secu Creditors Who Have Co Current value of the	ared claims on Schedule D: laims Secured by Property.  Current value of the
1		ZIP Code	☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative	the amount of any secu Creditors Who Have Co	ured claims on Schedule D: laims Secured by Property.
Street addre	ss, if available, or other description	ZIP Code	☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home	the amount of any secu Creditors Who Have Co Current value of the entire property?	ured claims on Schedule D: laims Secured by Property. Current value of the portion you own?
Street addre	ss, if available, or other description	ZIP Code	☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land	the amount of any secu Creditors Who Have Co Current value of the entire property?	ured claims on Schedule D: laims Secured by Property. Current value of the portion you own?
Street addre	ss, if available, or other description	ZIP Code	□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property	the amount of any secu Creditors Who Have Co Current value of the entire property?	ured claims on Schedule D: laims Secured by Property. Current value of the portion you own?
Street addre	ss, if available, or other description	ZIP Code	☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land ☐ Investment property ☐ Timeshare	the amount of any secu Creditors Who Have Co Current value of the entire property?	ured claims on Schedule D: laims Secured by Property. Current value of the portion you own?
Street addre	ss, if available, or other description	ZIP Code	□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property	the amount of any secu Creditors Who Have Co Current value of the entire property?	ured claims on Schedule D: laims Secured by Property.  Current value of the portion you own?  \$
Street addre	ss, if available, or other description	ZIP Code	□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other  Who has an interest in the property? Check	the amount of any secu Creditors Who Have Control Current value of the entire property?	ured claims on Schedule D: laims Secured by Property.  Current value of the portion you own?  \$

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debto Debto		oseph N. Futch Swendolyn D. Futch		Case number (if known)	19-50262-tjt
	,	trucks, tractors, sport utili	ty vehicles, motorcycles		
Y	'es				
3.1	Make:	Kia	Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model:	Optima	Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2016	Debtor 2 only	Current value of t	7
	Approxir	nate mileage: 51,00	Debtor 1 and Debtor 2 only	entire property?	he Current value of the portion you own?
	Other in	formation:	☐ At least one of the debtors and another		
			Check if this is community property (see instructions)	<b>\$17,500</b>	.00 \$17,500.00
3.2	Make:	Chevrolet	Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model:	Suburban	Debtor 1 only	the amount of any	secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2008	Debtor 2 only	Current value of t	
	Approxir	mate mileage: 300,00		entire property?	portion you own?
	Other in	formation:	☐ At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$6,500	.00 \$6,500.00
3.3	Make:	GMC	Who has an interest in the property? Check one	Do not deduct sec	ured claims or exemptions. Put
3.3	Model:	Acadia Denali	Debtor 1 only	the amount of any	secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2013	Debtor 2 only	Creditors with Hav	re Claims Secured by Property.
		mate mileage: 167,70		Current value of t entire property?	he Current value of the portion you own?
		formation:	At least one of the debtors and another	entire property:	portion you own:
			Check if this is community property (see instructions)	\$12,000	.00 \$12,000.00
	<i>mples:</i> B No		's and other recreational vehicles, other vehicles al watercraft, fishing vessels, snowmobiles, motorcy		
			u own for all of your entries from Part 2, includir rite that number here		\$36,000.00
Part 3	Descri	be Your Personal and Househ	old Items		
Do yo	ou own o	or have any legal or equitab	le interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Ex	amples: No	goods and furnishings Major appliances, furniture, li escribe	nens, china, kitchenware		·
		Household	Goods & Furnishings		\$5,000.00
			<b>J</b> -		

Official Form 106A/B Schedule A/B: Property page 2

_	ebtor 1 ebtor 2	Joseph N. Fu Gwendolyn I	Itch D. Futch Case num	ber (if known)	19-50262-tjt
7.	□ No	es: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scan phones, cameras, media players, games	ners; music c	ollections; electronic devices
			Televisions, Video Game System		\$800.00
8.	Example  No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects ons, memorabilia, collectibles	; stamp, coin	or baseball card collections;
9.	Example  No	ent for sports ares: Sports, photomusical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs,	skis; canoes	and kayaks; carpentry tools;
10	■ No		, shotguns, ammunition, and related equipment		
11	□ No		othes, furs, leather coats, designer wear, shoes, accessories		
			Clothing		\$2,000.00
12	□ No		velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, wat	ches, gems, ç	gold, silver
			Jewelry		\$900.00
13	Examp. ■ No	m animals les: Dogs, cats, l	pirds, horses		
14	■ No	ner personal and	d household items you did not already list, including any health aids you o	lid not list	
1			of all of your entries from Part 3, including any entries for pages you have number here	attached	\$8,700.00
		cribe Your Finance n or have any le	gial Assets  gal or equitable interest in any of the following?		Current value of the
_	- , 54 011	c uny k	g:		portion you own?  Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 3

	ebtor 1 ebtor 2	Joseph N. Fu Gwendolyn I		h			Case number (if known)	19-50262-tjt
16.	■ No	• •	·		ır home, in a safe	•	hand when you file your petiti	on
17.	•					ates of deposit; share e institution, list each	es in credit unions, brokerage n.	houses, and other similar
	_				Institut	tion name:		
			17.1.	Checking	Chase	e Bank		\$100.00
			17.2.	Checking	Come	erica		\$291.00
18.				cly traded stock ent accounts with		, money market acco	ounts	
				Institution or iss	uer name:			
19.	joint ve	blicly traded steenture	ock and	interests in inco	orporated and u	nincorporated busi	nesses, including an interes	et in an LLC, partnership, and
	■ No □ Yes.	Give specific info		about them me of entity:			% of ownership:	
20.	Negotia	able instruments	include p	personal checks,	cashiers' checks	on-negotiable instru , promissory notes, a eone by signing or de	and money orders.	
	■ No	Diverse and a life in fa						
	□ Yes. (	Give specific info		uer name:				
21.		nent or pension les: Interests in I			k), 403(b), thrift sa	avings accounts, or c	other pension or profit-sharing	plans
	_	ist each accoun	<u></u>	tely. of account:	Institut	tion name:		
22.	Your sh		d deposi	ts you have made			use from a company ), telecommunications compar	nies, or others
					Institut	tion name or individu	al:	
			Rent		Po Sh	naun Wang & Swa	allow Lei	\$1,000.00
23.	Annuitio	es (A contract fo	r a perio	dic payment of m	noney to you, eith	er for life or for a nur	mber of years)	
	☐ Yes	lss	suer nam	e and description	n.			
24.		s in an educatio C. §§ 530(b)(1), 5			a qualified ABL	E program, or unde	r a qualified state tuition pro	ogram.
	■ No □ Yes	Ins	stitution r	name and descrip	ption. Separately	file the records of an	y interests.11 U.S.C. § 521(c)	:
25.	Trusts,	equitable or fut	ure inte	rests in propert	y (other than any	ything listed in line	1), and rights or powers exe	ercisable for your benefit
	■ No □ Yes.	Give specific info	ormation	about them				

Official Form 106A/B

page 4

Schedule A/B: Property

Debtor 1 Debtor 2	Joseph N. Futch Gwendolyn D. Futch		Ca	se number (if known)	19-50262-tjt
		s, <b>trade secrets, and other intellectu</b> s, websites, proceeds from royalties an		<b>3</b>	
	Give specific information a	bout them			
	ses, franchises, and other oples: Building permits, exclu	general intangibles sive licenses, cooperative association	holdings, liquor license	s, professional license	es
	Give specific information a	bout them			
Money or	property owed to you?				Current value of the portion you own?  Do not deduct secured claims or exemptions.
□ No	funds owed to you				
■ Yes	. Give specific information al	bout them, including whether you alrea	ndy filed the returns and	the tax years	
		2019 Anticipated Accrue	d Tax Refund (est)	Federal and stat	e \$5,000.00
■ No □ Yes.	benefits; unpaid loans  Give specific information  sts in insurance policies	ty insurance payments, disability bene you made to someone else			
<i>Exam</i> ■ No	ples: Health, disability, or life	e insurance; health savings account (F	ISA); credit, homeowne	r's, or renter's insuran	ce
☐ Yes.		any of each policy and list its value. pany name:	Beneficiary	:	Surrender or refund value:
If you some		lue you from someone who has dieg g trust, expect proceeds from a life ins		rrently entitled to rece	ive property because
Exam □ No		ether or not you have filed a lawsuit tt disputes, insurance claims, or rights		r payment	
		Auto Accident Claim- Attor lawsuit has been filed, still			Unknown
■ No	contingent and unliquidat	ed claims of every nature, including	g counterclaims of the	debtor and rights to	set off claims

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1 Debtor 2	Joseph N. Futch Gwendolyn D. F	utch	Case number (if known)	19-50262-tjt
■ No	nancial assets you di Give specific informa			
		of your entries from Part 4, including any entries for poer here		\$6,391.00
Part 5: De	scribe Any Business-Re	elated Property You Own or Have an Interest In. List any real o	estate in Part 1.	,
		r equitable interest in any business-related property?		
	o to Part 6.			
☐ Yes. (	Go to line 38.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Accou	nts receivable or cor	nmissions you already earned		
□ No □ Yes.	Describe			
39. <b>Office</b> <i>Exam</i>	equipment, furnishin ples: Business-related	ngs, and supplies computers, software, modems, printers, copiers, fax mach	hines, rugs, telephones, desks	chairs, electronic devices
□ No □ Yes.	Describe			
40 Marki	Control of the contro			
40. Machi	nery, fixtures, equipn	nent, supplies you use in business, and tools of your t	trade	
□ No	<b>.</b>			
⊔ Yes.	Describe			
41. Inven	tory			
□ No				
	Describe			
42. Interes	sts in partnerships or	joint ventures		
□ No				
☐ Yes.		tion about them Name of entity:	% of ownership:	
	-		%	
43. <b>Custo</b> No.	mer lists, mailing list	s, or other compilations		
□ Do yo	ur lists include persona	Ily identifiable information (as defined in 11 U.S.C. § 101(41A))	?	
	□ No □ Yes. Describe			
				$\neg$

Official Form 106A/B Schedule A/B: Property page 6

Debtor Debtor	•		Case number (if known)	19-50262-tjt
44. <b>A</b> ny	y business-related	property you did not already list		
□ N □ Y	lo 'es. Give specific inf	ormation		
		of all of your entries from Part 5, including any entrumber here		
Part 6:		and Commercial Fishing-Related Property You Own or Hainterest in farmland, list it in Part 1.	ave an Interest In.	
	you own or have a	ny legal or equitable interest in any farm- or comm	ercial fishing-related property?	
	Yes. Go to line 47.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
	<b>m animals</b> amples: Livestock, p	poultry, farm-raised fish		
	lo ′es			
48. <b>Cro</b>	pps—either growing	g or harvested		
□ N □ Y	lo es. Give specific inf	ormation		
49. <b>Far</b>	m and fishing equi	pment, implements, machinery, fixtures, and tools	of trade	
□ N □ Y	lo 'es			
50. <b>Far</b>	m and fishing sup	plies, chemicals, and feed		
	lo ′es			
51. <b>An</b> y	y farm- and comme	ercial fishing-related property you did not already li	st	
	lo 'es. Give specific inf	ormation		
	,			
		of all of your entries from Part 6, including any entrumber here		

Describe All Property You Own or Have an Interest in That You Did Not List Above

Official Form 106A/B Schedule A/B: Property

page 7

Debtor 1	Joseph N. Futch			
Debtor 2	Gwendolyn D. Futch	Case number (if known)	19-50262-tjt	

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

63. Total of all property on Schedule A/B. Add line 55 + line 62

■ No

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

\$0.00

\$51,091.00

Part	8:	List the Totals of Each Part of this Form				
55.	Part '	1: Total real estate, line 2				\$0.00
56.	Part 2	2: Total vehicles, line 5		\$36,000.00		
57.	Part :	3: Total personal and household items, line 15		\$8,700.00		
58.	Part 4	4: Total financial assets, line 36		\$6,391.00		
59.	Part :	5: Total business-related property, line 45		\$0.00		
60.	Part (	6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part :	7: Total other property not listed, line 54	+ _	\$0.00		
62.	Total	I personal property. Add lines 56 through 61	_	\$51,091.00	Copy personal property total	\$51,091.00

Fill in this inform	mation to identify your	case:		
Debtor 1	Joseph N. Futch			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F MICHIGAN	
Case number	19-50262-tjt			
(if known)	10 00202 tjt			Check if this is an amended filing

# Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

to the applicable statutory amount.	o the applicable statutory amount.					
Part 1: Identify the Property You Claim as Exempt						
1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.						
☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)						
■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)						

2.	For any property you list or	Schedule A/B that	vou claim as exemp	t, fill in the information below.
----	------------------------------	-------------------	--------------------	-----------------------------------

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	ck only one box for each exemptic	on.
Debtor 1 Exemptions Household Goods & Furnishings Line from Schedule A/B: 6.1	\$5,000.00	\$2,500.  100% of fair market value, u any applicable statutory limit	p to
Televisions, Video Game System Line from Schedule A/B: 7.1	\$800.00	\$400. 100% of fair market value, ul any applicable statutory limit	p to
Clothing Line from Schedule A/B: 11.1	\$2,000.00	\$1,000.  100% of fair market value, u <sub>i</sub> any applicable statutory limit	p to
Jewelry Line from Schedule A/B: 12.1	\$900.00	\$450.  100% of fair market value, ulany applicable statutory limit	p to
Checking: Chase Bank Line from Schedule A/B: 17.1	\$100.00	\$50. 100% of fair market value, u any applicable statutory limit	p to

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 4

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Rent: Po Shaun Wang & Swallow Lei Line from Schedule A/B: 22.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(5)
	Life from Schedule A.B. 22.1			100% of fair market value, up to any applicable statutory limit	
	Federal and state: 2019 Anticipated Accrued Tax Refund (est)	\$5,000.00		\$2,500.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3			ed on or after the date of adjustme	nt.)
	☐ Yes. Did you acquire the property covere ☐ No ☐ Yes	d by the exemption wi	thin 1	.215 days before you filed this case	?

case:		
Middle Name	Last Name	
ıtch		
Middle Name	Last Name	
EASTERN DISTRICT O	OF MICHIGAN	
		☐ Check if this is an amended filing
		Middle Name Last Name

# Official Form 106C

Part 1: Identify the Property You Claim as Exempt

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming	ng? Check one only, even if your spouse is filing with you.					
	☐ You are claiming state and federal nonbar	nkruptcy exemptions.					
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)					
2.	For any property you list on Schedule A/E						
	Brief description of the property and line on Schedule A/B that lists this property						
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
De	ebtor 2 Exemptions						
	Household Goods & Furnishings Line from Schedule A/B: 6.1	\$5,000.00		\$2,500.00	11 U.S.C. § 522(d)(3)		
	Line Ironi Scriedule Arb. 6.1			100% of fair market value, up to any applicable statutory limit			
	Televisions, Video Game System Line from Schedule A/B: 7.1	\$800.00		\$400.00	11 U.S.C. § 522(d)(3)		
				100% of fair market value, up to any applicable statutory limit			
	Clothing Line from Schedule A/B: 11.1	\$2,000.00	•	\$1,000.00	11 U.S.C. § 522(d)(3)		
	Zino nom osnosalo 772. TTT			100% of fair market value, up to any applicable statutory limit			
	Jewelry Line from Schedule A/B: 12.1	\$900.00		\$450.00	11 U.S.C. § 522(d)(4)		
	Ellie Holli Golloddie 772. 1211			100% of fair market value, up to any applicable statutory limit			
	Checking: Chase Bank Line from Schedule A/B: 17.1	\$100.00		\$50.00	11 U.S.C. § 522(d)(5)		
	Ellio II Sili Golloddio 772. III			100% of fair market value, up to any applicable statutory limit			

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 3 of 4

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Checking: Comerica Line from Schedule A/B: 17.2	\$291.00		\$291.00	11 U.S.C. § 522(d)(5)
	Ellio Ilom osinodale i Vi I			100% of fair market value, up to any applicable statutory limit	
	Federal and state: 2019 Anticipated Accrued Tax Refund (est)	\$5,000.00		\$2,500.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	Auto Accident Claim- Attorney- Auto Accident Attorneys- lawsuit has been	Unknown		\$11,059.00	11 U.S.C. § 522(d)(5)
	filed, still in waiting for resolution Line from Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit	
	Auto Accident Claim- Attorney- Auto Accident Attorneys- lawsuit has been	Unknown		\$25,150.00	11 U.S.C. § 522(d)(11)(D)
	filed, still in waiting for resolution Line from Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every			led on or after the date of adjustme	nt.)
	<ul><li>No</li><li>☐ Yes. Did you acquire the property covered</li></ul>	ad by the exemption wi	ithin 1	215 days before you filed this case	2
	□ No	ed by the exemption wi		,213 days before you filed this case	:
	☐ Yes				

Fill	in this information to iden	tify your case:			
Deb	otor 1 Joseph N	I. Futch  Middle Name Last Name		-	
	otor 2  Gwendol  First Name	yn D. Futch  Middle Name Last Name		-	
` '	, <b>3</b> ,				
Unit	ted States Bankruptcy Court	for the: EASTERN DISTRICT OF MICHIGAN		-	
Cas (if kn	te number own) 19-50262-tjt				if this is an
Off	icial Form 106D				J
Sc	hedule D: Cred	itors Who Have Claims Secured	d by Propert	У	12/15
1. Do	■ Yes. Fill in all of the infor	submit this form to the court with your other schedules. You mation below.	ou have nothing else	to report on this form.	
	t 1: List All Secured Cla		Column A	Column B	Column C
for e	each claim. If more than one cre	itor has more than one secured claim, list the creditor separately ditor has a particular claim, list the other creditors in Part 2. As alphabetical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Arbor Professional				
2.1	Solutions Creditor's Name	Describe the property that secures the claim:	\$28,921.00	\$12,000.00	\$16,921.00
	Creditor's Ivame	2013 GMC Acadia Denali 167,765 miles			
	340 E Huron St Ann Arbor, MI 48104	As of the date you file, the claim is: Check all that apply.  Contingent			
	Number, Street, City, State & Zip C	Code Unliquidated			
Who	o owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
_	Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or sec car loan)	cured		
_	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	At least one of the debtors and a	nother			
	Check if this claim relates to a	☐ Other (including a right to offset)			

community debt

Date debt was incurred 2017

Last 4 digits of account number

0001

Debtor 1 Joseph N. Futch		Case number (if known)	19-50262-tjt	
First Name Middle Na	ame Last Name			
Debtor 2 Gwendolyn D. Futch First Name Middle Na	ame Last Name			
2.2 Kia Motors Finance Co	Describe the property that secures the claim:	\$19,145.00	\$17,500.00	\$1,645.00
Creditor's Name	2016 Kia Optima 51,000 miles			
Attn: Bankruptcy	,			
Po Box 20825	A collection of the state of th			
Fountain Valley, CA	As of the date you file, the claim is: Check all that apply.			
92728	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	■ An agreement you made (such as mortgage or	cocurad		
Debtor 2 only	car loan)	secureu		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)	)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Date debt was incurred 2016	Last 4 digits of account number 331	3		
Santander Consumer			*	<b>.</b>
USA	Describe the property that secures the claim:	\$14,979.00	\$6,500.00	\$8,479.00
Creditor's Name	2008 Chevrolet Suburban 300,000			
	miles			
Attn: Bankruptcy	As of the date you file, the claim is: Check all that			
Po Box 961245	apply.			
Fort Worth, TX 76161	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or	secured		
☐ Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)	)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Date debt was incurred 2014	Last 4 digits of account number 100	0		
-	olumn A on this page. Write that number here:	\$63,045	.00	
If this is the last page of your form, add	the dollar value totals from all pages.	\$63,045	.00	
Write that number here:		400,000		
Part 2: List Others to Be Notified fo	r a Debt That You Already Listed			
trying to collect from you for a debt you o	e notified about your bankruptcy for a debt that y we to someone else, list the creditor in Part 1, an you listed in Part 1, list the additional creditors h is page.	d then list the collection age	ncy here. Similarly, if yo	u have more
Name, Number, Street, City, State & 2	·	which line in Part 1 did you ent	er the creditor? 2.1	
University of Michigan Cred				
PO Box 7850 Ann Arbor, MI 48107	Last	4 digits of account number	_	

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

Fill in this information to Debtor 1  Jos First 1	eph N. Futch	asc.								
	eph N. Futch									
	Jame	Mide	dle Name	Last Nan	Δ		_			
	endolyn D. Fut		ale i valile	Last Nan	C					
pouse if, filing) First N			dle Name	Last Nan	е		-			
nited States Bankruptc	v Court for the	FASTER	RN DISTRIC	T OF MICHIGAN						
	, countries uner						_			
ase number 19-502	62-tjt						_			
KIIOWII)								amende	f this is an	1
								amonac	a ming	
fficial Form 106	E/F									
chedule E/F: C	reditors W	ho Ha	ve Unse	cured Claim	S				12/15	5
y executory contracts or hedule G: Executory Cor hedule D: Creditors Who t. Attach the Continuation me and case number (if I	ntracts and Unexpire Have Claims Secu In Page to this page Known).	red Leases ired by Pro e. If you ha	s (Official For operty. If more ove no informa	m 106G). Do not incl e space is needed, c	ude any cre	ditors with part you need, fill it	ially secured cla out, number the	ims that ar e entries in	e listed in the boxes	on the
			Jiaiiiis							
	ur PRIORITY Uns		vainet vau?							
Do any creditors have			gainst you?							
Do any creditors have  □ No. Go to Part 2.  ■ Yes.  List all of your priority	priority unsecured	I claims ag	or has more th							
Do any creditors have ☐ No. Go to Part 2. ☐ Yes.	r unsecured claims, im it is. If a claim has in alphabetical order creditor holds a par	I claims ag  If a credite s both prior r according ticular clair	or has more th ity and nonpric to the creditor n, list the othe	ority amounts, list that 's name. If you have r r creditors in Part 3.	claim here a nore than tw	nd show both pri	ority and nonprior red claims, fill out Priority	rity amounts	ation Page Nonpriorit	as e of
Do any creditors have  No. Go to Part 2.  Yes.  List all of your priority identify what type of clai possible, list the claims Part 1. If more than one (For an explanation of e	unsecured claims. In it is. If a claim has in alphabetical order creditor holds a par each type of claim, se	I claims ag  If a credite s both prior r according ticular clair	or has more th ity and nonpric to the creditor n, list the othe uctions for this	ority amounts, list that 's name. If you have r r creditors in Part 3.	claim here a nore than tw booklet.)	nd show both pri o priority unsecu	ority and nonprior red claims, fill out Priority amount	rity amounts	ation Page	as e of ty
Do any creditors have  No. Go to Part 2.  Yes.  List all of your priority identify what type of clai possible, list the claims Part 1. If more than one (For an explanation of e	unsecured claims. In it is. If a claim has in alphabetical order creditor holds a par each type of claim, se	I claims ag  If a credite s both prior r according ticular clair	or has more th ity and nonpric to the creditor n, list the othe uctions for this Last 4 digit	ority amounts, list that its name. If you have r creditors in Part 3. If form in the instruction s of account number	claim here a nore than two booklet.)	nd show both pri o priority unsecu Total claim	ority and nonprior red claims, fill out Priority amount	rity amounts	ation Page Nonpriorit	as e of ty
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Do any creditors have  No. Go to Part 2.  Yes.  List all of your priority identify what type of clai possible, list the claims Part 1. If more than one (For an explanation of e  Dequetra Hay Priority Creditor's Nunknown MI  Number Street City Who incurred the del	runsecured claims. Im it is. If a claim has in alphabetical order creditor holds a par each type of claim, se	I claims ag  If a credite s both prior r according ticular clair	or has more the ity and nonprice to the creditor n, list the other uctions for this Last 4 digit.	ority amounts, list that it's name. If you have represented from in the instruction of account number the debt incurred?	claim here a nore than two booklet.)  9319  1998	nd show both priority unsecu  Total claim  \$43,79	ority and nonprior red claims, fill out Priority amount	rity amounts	ation Page Nonpriorit	as e of ty
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Do any creditors have  No. Go to Part 2.  Yes.  List all of your priority identify what type of clai possible, list the claims Part 1. If more than one (For an explanation of e  Dequetra Hay Priority Creditor's Nunknown MI  Number Street City Who incurred the del	unsecured claims, im it is. If a claim has in alphabetical order creditor holds a parach type of claim, sees.  es.  lame  / State Zip Code bt? Check one.	I claims ag  If a credite s both prior r according ticular clair	or has more the ity and nonprice to the creditor m, list the other uctions for this Last 4 digit:  When was to Continged Unliquidated	ority amounts, list that it's name. If you have r r creditors in Part 3. If form in the instruction s of account number the debt incurred? ate you file, the claim ent	claim here a hore than two booklet.)  9319  1998  is: Check a	nd show both priority unsecu  Total claim  \$43,79	ority and nonprior red claims, fill out Priority amount	rity amounts	ation Page Nonpriorit	as e of ty
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Do any creditors have  No. Go to Part 2.  Yes.  List all of your priority identify what type of clai possible, list the claims Part 1. If more than one (For an explanation of e  Dequetra Hay/Priority Creditor's Nunknown MI Number Street City Who incurred the del  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 1	runsecured claims, im it is. If a claim has in alphabetical order creditor holds a parach type of claim, sees.  Idea of the control of the co	I claims ag	or has more the ity and nonprice to the creditor m, list the other uctions for this Last 4 digit:  When was to As of the date	ority amounts, list that it's name. If you have it reditors in Part 3. If form in the instruction is of account number the debt incurred? In the claim and the count of the claim and count obligations and certain other debts.	claim here a hore than two booklet.)  9319  1998  is: Check a aaim:	nd show both prio priority unsecu  Total claim  \$43,79:  Ill that apply  government	Priority amount  Priority amount  5.00 \$43	rity amounts	ation Page Nonpriorit	as e of ty
. Do any creditors have  No. Go to Part 2.  Yes.  List all of your priority identify what type of clai possible, list the claims Part 1. If more than one (For an explanation of e  Dequetra Hay: Priority Creditor's Nunknown MI Number Street City Who incurred the del  Debtor 1 only Debtor 2 only Debtor 1 and Debte At least one of the Check if this clain Is the claim subject t	r unsecured claims, im it is. If a claim has in alphabetical order creditor holds a par ach type of claim, sees.  lame  'State Zip Code bot? Check one.  or 2 only debtors and another in is for a communication.	I claims ag	or has more thity and nonpric to the creditor m, list the other uctions for this Last 4 digit:  When was to Continge Unliquidad Disputed Type of PRIDOMESTIC DOMESTIC Claims for the continuous contin	ority amounts, list that it's name. If you have rear creditors in Part 3. If form in the instruction is of account number the debt incurred?  In the debt incurred?  In the claim and the claim and the count of the claim and the count of the	claim here a hore than two booklet.)  9319  1998  is: Check a aaim:	nd show both prio priority unsecu  Total claim  \$43,79:  Ill that apply  government	Priority amount  Priority amount  5.00 \$43	rity amounts	ation Page Nonpriorit	as e of ty
. Do any creditors have  □ No. Go to Part 2.  ■ Yes.  List all of your priority identify what type of clai possible, list the claims Part 1. If more than one (For an explanation of e  1 Dequetra Hay: Priority Creditor's Nunknown MI Number Street City Who incurred the del  ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debte □ At least one of the □ Check if this claim	r unsecured claims, im it is. If a claim has in alphabetical order creditor holds a par ach type of claim, sees.  lame  'State Zip Code bot? Check one.  or 2 only debtors and another in is for a communication.	I claims ag	or has more the ity and nonprice to the creditor m, list the other uctions for this Last 4 digit:  When was to As of the date	ority amounts, list that it's name. If you have rear creditors in Part 3. If form in the instruction is of account number the debt incurred?  In the debt incurred?  In the claim and the claim and the count of the claim and the count of the	claim here a hore than two booklet.)  9319  1998  is: Check a a aim:	nd show both prio priority unsecu  Total claim  \$43,799  Ill that apply  government u were intoxicate	Priority amount  Priority amount  5.00 \$43	rity amounts	ation Page Nonpriorit	as e of ty

Total claim

Official Form 106 E/F

Part 2.

Schedule E/F: Creditors Who Have Unsecured Claims

Debto	r 2 Gwendolyn D. Futch		Case number (if known) 19-50262-tjt	
4.1	Acceptance Now	Last 4 digits of account number	1169	\$996.00
	Nonpriority Creditor's Name Attn: Bankruptcy 5501 Headquarters Drive Plano, TX 75024	When was the debt incurred?	Opened 05/17 Last Active 3/20/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Rental Agre	eement	
4.2	Acima Credit	Last 4 digits of account number	7743	\$100.00
	Nonpriority Creditor's Name 9815 Monroe Street 4th Floor Sandy, UT 84070	When was the debt incurred?	Opened 12/18 Last Active 1/09/19	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	$\square$ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Lease		
4.3	AES/PHEAA	Last 4 digits of account number	2570	\$396.00
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 01/16 Last Active 5/11/18	
	Po Box 2461 Harrisburg, PA 17105	when was the debt incurred?	3/11/16	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		

debt

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

report as priority claims

Is the claim subject to offset?

■ Other. Specify Charge Account

 $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

	or 1 Joseph N. Futch or 2 Gwendolyn D. Futch		Case number (if known)	19-50262-tjt
4.4	Ally Financial	Last 4 digits of account number	2953	\$100.0
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 380901 Bloomington, MN 55438	When was the debt incurred?	Opened 10/17 Last Ac 10/05/18	ctive
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that	t you did not
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other Specify Automobile	9	
4.5	Convergent Outsourcing, Inc.	Last 4 digits of account number	7924	\$351.0
	Nonpriority Creditor's Name	_		
	Attn: Bankruptcy	When was the debt incurred?	Opened 03/19	
	Po Box 9004 Renton, WA 98057			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	• ,		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that	t you did not
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Collection	Attorney Comcast	
4.6	Credit One Bank	Last 4 digits of account number	9247	\$2,315.0
	Nonpriority Creditor's Name	_		
	Attn: Bankruptcy Department	When was the debt incurred?	Opened 06/12 Last A	ctive
	Po Box 98873 Las Vegas, NV 89193	when was the dept incurred?	5/12/19	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		

debt

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Credit Card

☐ Disputed

☐ Student loans

report as priority claims

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

lacksquare At least one of the debtors and another

☐ Check if this claim is for a community

Type of NONPRIORITY unsecured claim:

 $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Gwendolyn D. Futch		Case number (if known) 19-5020	<u>,.</u>
Credit One Bank	Last 4 digits of account number	6111	\$855.0
Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 09/17 Last Active 5/28/19	
Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did	not
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Credit Card	I	
Credit One Bank	Last 4 digits of account number	0813	\$100.
Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 12/15 Last Active 4/09/18	
Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did	not
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Dept of Ed / Navient	Last 4 digits of account number	0904	\$22,023.
Nonpriority Creditor's Name Attn: Claims Dept		Opened 09/13 Last Active	
Po Box 9635	When was the debt incurred?	6/30/19	
Wilkes Barr, PA 18773	_		
Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
— Bobiot i only	☐ Unliquidated		

Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify **Educational** 

Type of NONPRIORITY unsecured claim:

☐ Disputed

Debtor 1 and Debtor 2 only

lacksquare At least one of the debtors and another

Debtor 1	Joseph N. Futch	
Debtor 2	Gwendolyn D. Futch	Case number

2 Gwendolyn D. Futch		Case number (if known) 19-50262-tjt	
Easy Pay/Duvera Collections	Last 4 digits of account number	1690	\$255.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 2549 Carlsbad, CA 92018	When was the debt incurred?	Opened 9/06/18 Last Active 6/07/19	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Installment	Sales Contract	
ERC/Enhanced Recovery Corp	Last 4 digits of account number	9359	\$143.
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 07/15	•
8014 Bayberry Road Jacksonville, FL 32256			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Collection	Attorney Tmobile	
Finance System, Inc.	Last 4 digits of account number	5729	\$93.
Nonpriority Creditor's Name			
Attn: Bankruptcy 5703 National Road East Po Box 786	When was the debt incurred?	Opened 01/17	
Richmond, IN 47374 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	Student loans		
debt	Obligations arising out of a sepa	aration agreement or divorce that you did not	

**Collection Attorney Southfield Radiology** Other Specify Associate ☐ Yes

Official Form 106 E/F

■ No

Schedule E/F: Creditors Who Have Unsecured Claims

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Debtor 1	Joseph N. Futch	
Debtor 2	Gwendolyn D. Futch	

19-50262-tjt Case number (if known)

4.1 3	Finance System, Inc.	Last 4 digits of account number	5731	\$93.00
	Nonpriority Creditor's Name Attn: Bankruptcy 5703 National Road East Po Box 786 Richmond, IN 47374	When was the debt incurred?	Opened 01/17	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify  Collection Associate	Attorney Southfield Radiology	
4.1	Finance System, Inc.	Last 4 digits of account number	5730	\$90.00
	Nonpriority Creditor's Name Attn: Bankruptcy 5703 National Road East Po Box	When was the debt incurred?	Opened 01/17	
	786 Richmond, IN 47374 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes		Attorney Southfield Radiology	

Debtor 1	Joseph N. Futch	
Debtor 2	Gwendolyn D. Futch	Case number (if kno

4.1 5	First Nataional Bank/Legacy	Last 4 digits of account number	8789	\$100.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5097 Sioux Falls, SD 57117	When was the debt incurred?	Opened 9/22/11 Last Active 8/06/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	First PREMIER Bank Nonpriority Creditor's Name	Last 4 digits of account number	9490	\$452.00
	Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117	When was the debt incurred?	Opened 09/13 Last Active 1/28/14	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	First PREMIER Bank	Last 4 digits of account number	3170	\$100.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5524 Signar Follo, SD 57447	When was the debt incurred?	Opened 08/09 Last Active 8/06/17	
	Sioux Falls, SD 57117  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	1	

Schedule E/F: Creditors Who Have Unsecured Claims

19-50262-tjt

Debtor 1 Joseph N. Futch	
Debtor 2 Gwendolyn D. Futch	Case number (if known)

4.1 8	Genesis Bc/Celtic Bank	Last 4 digits of account number 5555		\$586.00
<u> </u>	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 4477 Beaverton, OR 97076	When was the debt incurred?	Opened 02/18 Last Active 11/09/18	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	ng plans, and other similar debts	
	Yes	Other Specify Credit Card	<u> </u>	
4.1	Glbal Srvcs		1409	\$2,836.00
9	Nonpriority Creditor's Name	Last 4 digits of account number		φ2,030.00
	5320 College Blvd Shawnee Mission, KS 66211	When was the debt incurred?	Opened 1/02/18 Last Active 3/16/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Check Cred	dit Or Line Of Credit	
4.2 0	H & R Accounts, Inc.	Last 4 digits of account number	0698	\$68.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 672	When was the debt incurred?	Opened 01/19	
	Moline, IL 61265  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify  Collection Arbor	Attorney St Joseph Mercy - Ann	

Schedule E/F: Creditors Who Have Unsecured Claims

19-50262-tjt

Debtor 1	Joseph N. Futch		
Debtor 2	Gwendolyn D. Futch	Case number (if known)	19-50262-tjt

4.2 1	HC Processing Center	Last 4 digits of account number	7230	\$1,271.00
	Nonpriority Creditor's Name Attention Bankruptcy Po Box 708970 Sandy, UT 84070	When was the debt incurred?	Opened 08/13 Last Active 6/19/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed  Type of NONPRIORITY unsecured  Student loans	d claim:	
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card		
4.2	LVNV Funding/Resurgent Capital  Nonpriority Creditor's Name	Last 4 digits of account number	0813	\$676.00
	Attn: Bankruptcy Po Box 10497 Greenville, SC 29603	When was the debt incurred?	Opened 12/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts  Company Account Credit One	
	Yes	■ Other. Specify Bank N.A.		
4.2 3	Midwest Recovery Systems  Nonpriority Creditor's Name	Last 4 digits of account number	4325	\$609.00
	Attn: Bankruptcy Po Box 899	When was the debt incurred?	Opened 6/26/19	
	Florissant, MO 63032  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured  ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Joseph N. Futch	
Debtor 2 Gwendolyn D. Futch	Case number (if know

4.2 4	New England Fcu	Last 4 digits of account number	6440	\$1,138.00
·	Nonpriority Creditor's Name	_		<u> </u>
	Po Box 527 Williston, VT 05495	When was the debt incurred?	Opened 08/17 Last Active 5/13/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.2 5	State Farm Bank	Last 4 digits of account number	0001	\$100.00
	Nonpriority Creditor's Name Attn: Bankrupcty Po Box 3298 Milwaukee, WI 53201	When was the debt incurred?	Opened 08/13 Last Active 11/16/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Automobile	3	
4.2	Synchrony Bank	Last 4 digits of account number	9008	\$1,297.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 12/17 Last Active 2/25/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	■ No □ Yes	· · ·		
	∟ Yes	Other. Specify Charge Acc	Jount	

Schedule E/F: Creditors Who Have Unsecured Claims

19-50262-tjt

Debtor 1	Joseph N. Futch	
Debtor 2	Gwendolyn D. Futch	

19-50262-tjt Case number (if known)

4.2 7	Synchrony Bank/Walmart	Last 4 digits of account number	3438	\$316.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 08/16 Last Active 5/07/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	□ Debts to pension or profit-sharin ■ Other. Specify Charge Acc		
4.2	Toyota Financial Services	Last 4 digits of account number	0001	\$100.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 8026 Cedar Rapids, IA 52409	When was the debt incurred?	Opened 07/12 Last Active 8/10/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Automobile		
4.2	Transnati	Last 4 digits of account number	9973	\$100.00
	Nonpriority Creditor's Name  1162 St Georges Avenue Avenel, NJ 07001	When was the debt incurred?	Opened 1/22/13 Last Active 3/05/13	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Student loans	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Medical	g plans, and other similar debts	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

	Joseph N Gwendoly	l. Futch yn D. Futch		Case r	number (if known)	19-50262-tj	t
		stern Health Center	Last 4 digits of account number	<sub>r</sub> 518	4		\$200.00
27	onpriority Cred 700 Hamlii nkster, Ml 4	n Blvd.	When was the debt incurred?	201	8		
Nu	umber Street (	City State Zip Code the debt? Check one.	As of the date you file, the clair	n is: Che	ck all that apply		
	Debtor 1 onl	у	☐ Contingent				
	Debtor 2 onl	y	☐ Unliquidated				
	Debtor 1 and	d Debtor 2 only	☐ Disputed				
	At least one	of the debtors and another	Type of NONPRIORITY unsecu	red claim	:		
	_	s claim is for a community	☐ Student loans				
de	ebt	bject to offset?	☐ Obligations arising out of a se report as priority claims	paration a	agreement or divorce	that you did not	
	No		☐ Debts to pension or profit-sha	ring plans	s, and other similar de	ebts	
	Yes		Other Specify medical b	٠.	,		
	Vestcreek I		Last 4 digits of account numbe	r 90X	<b>1</b>		\$2,011.00
A	onpriority Cred ttn: Bankr o Box 551	uptcy	When was the debt incurred?	Ope 6/24	ened 2/06/19 La 1/19	ast Active	
G	ilen Allen,	VA 23058					
		City State Zip Code	As of the date you file, the clair	n is: Che	ck all that apply		
		the debt? Check one.	_				
	Debtor 1 onl	у	☐ Contingent				
	Debtor 2 onl	у	☐ Unliquidated				
	Debtor 1 and	d Debtor 2 only	☐ Disputed				
	At least one	of the debtors and another	Type of NONPRIORITY unsecu	red claim	:		
		s claim is for a community	☐ Student loans				
	ebt the claim su	bject to offset?	Obligations arising out of a se report as priority claims			,	
	No		Debts to pension or profit-sha	ring plans	s, and other similar de	ebts	
	Yes		Other. Specify Lease				
Part 3:	List Others	s to Be Notified About a Debt	That You Already Listed				
is trying have mo	to collect fro	m you for a debt you owe to som	out your bankruptcy, for a debt tha neone else, list the original creditor you listed in Parts 1 or 2, list the ad submit this page.	in Parts	1 or 2, then list the	collection agency	here. Similarly, if you
Name and			n which entry in Part 1 or Part 2 did y	_	-		
	-Child Sup Frand Ave.	=			: Creditors with Prior	-	
P.O. Box				☐ Part 2	: Creditors with Nonp	priority Unsecured	Claims
Lansing	, MI 48909						
		L;	ast 4 digits of account number				
Part 4:	Add the Ar	nounts for Each Type of Uns	ecured Claim				
6. Total the		certain types of unsecured claim	is. This information is for statistica	l reportin	ng purposes only. 28	3 U.S.C. §159. Add	I the amounts for each
					Total	Claim	
Total	6a.	Domestic support obligations		6a.	\$	43,795.00	
claims from Part 1	<b>1</b> 6b.	Taxes and certain other debts	YOU OWE the government	6b.	\$	0.00	
ait i	6c.	•	jury while you were intoxicated	6c.	\$ \$	0.00	
	6d.		cured claims. Write that amount here.		\$	0.00	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Joseph N. Futch
Debtor 2 Gwendolyn D. Futch

Total Nonpriority. Add lines 6f through 6i.

Total claims from Part 2

19-50262-tjt Case number (if known) 6e. Total Priority. Add lines 6a through 6d. 6e. 43,795.00 Total Claim Student loans 6f. 22,023.00 Obligations arising out of a separation agreement or divorce that 0.00 you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts 6g. 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 6i. 17,847.00

6j.

39,870.00

Fill in this inform	mation to identify your	case:		
Debtor 1	Joseph N. Futch			
	First Name	Middle Name	Last Name	
Debtor 2	Gwendolyn D. Fu	tch		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	EASTERN DISTRICT C	PF MICHIGAN	
Case number	19-50262-tjt			
(if known)				☐ Check if this is an
				amended filing

## Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Po Shaun Wang & Swallow Lei 32100 Telegraph Suite 240 Franklin, MI 48025	Lease Agreement Expires: 6/31/2021 debtor pays half of the rent and the church pays the other half

Fill in thi	s information to identify	your case:		
Debtor 1	Joseph N. F	utch		
D - l- 1 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fi	Gwendolyn iling) First Name	D. Futch  Middle Name	Last Name	
United St	ates Bankruptcy Court for	the: EASTERN DISTRICT OF MI	CHIGAN	
Case nun	mber <b>19-50262-tjt</b>			
(if known)	19-30202-131			☐ Check if this is an
				amended filing
Officia	al Form 106H			
		)		
Sche	dule H: Your C	odeptors		12/15
ill it out, your nam	and number the entries in e and case number (if ki	n the boxes on the left. Attach the nown). Answer every question.	Additional Page to this page.	space is needed, copy the Additional Page, On the top of any Additional Pages, write
1. Do	you have any codebtor	s? (If you are filing a joint case, do no	ot list either spouse as a codebto	or.
□ No	)			
■ Ye	es			
Arizo	ona, California, Idaho, Loui o. Go to line 3.	re you lived in a community proper siana, Nevada, New Mexico, Puerto er spouse, or legal equivalent live with	Rico, Texas, Washington, and W	nity property states and territories include Visconsin.)
	П.,			
	□ No □ Yes.			
	In which communit	y state or territory did you live?	Fill in th	ne name and current address of that person.
	City	State	Zip Code	
in lin Form	e 2 again as a codebtor	only if that person is a guarantor o	r cosigner. Make sure you hav	use is filing with you. List the person shown we listed the creditor on Schedule D (Official hedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebto Name, Number, Street, City, State			2: The creditor to whom you owe the debt all schedules that apply:
			2.700110	
3.1	St. Joseph Tabernac	le	☐ Sche	edule D, line
	13041 W. Chicago		□ Sche	edule E/F, line
	Detroit, MI 48228		☐ Sche	edule G
			Po Sha	un Wan <mark>g &amp; S</mark> wallow Lei

Official Form 106H Schedule H: Your Codebtors Page 1 of 1 Best Case, LLC - www.bestcase.com
19-50262-tjt Doc 9 Filed 07/22/19 Entered 07/22/19 15:12:27 Page 31 of 43

Fill in this information to	o identify your case:	
Debtor 1	Joseph N. Futch	
Debtor 2 (Spouse, if filing)	Gwendolyn D. Futch	
United States Bankrupt	cy Court for the: EASTERN DISTRICT OF MICHIGAN	
Case number (If known)	50262-tjt	Check if this is:  An amended filing  A supplement showing postpetition chapter
Official Form	1061	13 income as of the following date:  MM / DD/ YYYY

#### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Describe Employment Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. Employed ■ Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Pastor Driver** Include part-time, seasonal, or **Employer's name** Lyft St. Joseph Tabernacle self-employed work. Occupation may include student **Employer's address** 13041 W. Chicago 185 Berry St. Suite 5000 or homemaker, if it applies. Detroit, MI 48228 San Francisco, CA 94107 How long employed there? 14 years 2 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all pavroll 0.00 2,167.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 3. 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 4 2,167.00 0.00

Debtor 1 Debtor 2 Joseph N. Futch Gwendolyn D. Futch

Case number (if known) 19-50262-tjt

Copy line 4 here					For	Debtor 1		Debtor 2 or -filing spouse	
5. List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions  5b. Mandatory contributions for retirement plans  5c. Voluntary contributions for retirement plans  5c. Voluntary contributions for retirement plans  5c. S. 0.00 \$ 0.00  5c. Required repayments of retirement fund loans  5c. S. 0.00 \$ 0.00  5c. Required repayments of retirement fund loans  5c. S. 0.00 \$ 0.00  5c. Insurance  5c. S. 0.00 \$ 0.00  5c. Social Security  5		Сору	line 4 here	4.	\$	2,167.00			
5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5d. Required repayments of retirement fund loans 5d. \$0.00 \$0.00 5b. Inchestic support obligations 5d. Voluntary contributions 5d. \$0.00 \$0.00 5d. Union dues 5d. Union dues 5d. Voluntary contributions 5d. \$0.00 \$0.00 5d. Union dues 5d. Union dues 5d. Voluntary Contributions 5d. \$0.00 \$0.00 5d. Union dues 5d. Voluntary Contributions 5d. \$0.00 5d. Union dues 5d. Union dues 5d. Voluntary Contributions 5d. \$0.00 5d. Voluntary Contribution 5d. \$0.00 5d. Voluntary Contribution 5d. \$0.00 5d. Voluntary Security Contribution 5d. \$0.00 5d. Voluntary Security Security Folial Support, child support, maintenance, divorce sections, and property settlement. 6d. Venerophyment compensation 6d. Venerophyment compens	5.	List a	all payroll deductions:		_	,			
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55. Required repayments of retirement fund loans 56. Insurance 57. Domestic support obligations 58. Insurance 59. \$ 0.00 \$ 0.00 59. Union dues 59. \$ 0.00 \$ 0.00 50. 0.00		5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
Second		5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
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5g. Union dues   5g. \$ 0.00 \$ 0.00    6h. Other deductions. Specify:   5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   6. \$ 0.00 \$ 0.00    7. Calculate total monthly take-home pay. Subtract line 6 from line 4.   7. \$ 2,167.00 \$ 0.00    8. List all other income regularly received:   8a. Net income from rental property and from operating a business, profession, or farm. Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.   8a. \$ 0.00 \$ 0.00    8b. Interest and dividends   8a. \$ 0.00 \$ 0.00    8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   8d. \$ 0.00 \$ 0.00    8c. Social Security   8d. \$ 0.00 \$ 0.00    8d. Social Security   8d. \$ 0.00 \$ 0.00    8d. Social Security   8d. \$ 0.00 \$ 0.00    8d. Other government assistance that you regularly receive include cash assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.   8f. \$ 0.00 \$ 0.00    8g. Pension or retirement income   8g. \$ 0.00 \$ 0.00    8h. Other monthly income. Specify: uber/llyft income   8h. \$ 0.00 \$ 0.00    9a. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   9. \$ 1,150.00 \$ 0.00    9b. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   9. \$ 1,150.00 \$ 1,800.00    10. Calculate monthly income. Add lines 8a+8b+8c+8d-8e+8f+8g+8h.   9. \$ 1,150.00 \$ 1,800.00    11. + \$ 1,800.00 \$ 1,100.00 \$ 1,		5e.	Insurance	5e.	\$	0.00	\$	0.00	
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odd jobs son contribution \$ 750.00 \$ 0.00  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 1,150.00 \$ 1,800.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$ 5,117.00  Combined monthly income  No.		8g.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income	_ 8f. _ 8g.	\$	0.00	\$	0.00	
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Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$ 5,117.00 Combined monthly income  13. Do you expect an increase or decrease within the year after you file this form?  No.	11.	Include other Do no	de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not	depen					0.00
13. Do you expect an increase or decrease within the year after you file this form?  ■ No. monthly income	12.	Write	that amount on the Summary of Schedules and Statistical Summary of Certa						5,117.00
	13.	Do yo	ou expect an increase or decrease within the year after you file this form	?					
☐ Yes. Explain:			No.						
			Yes. Explain:						

Fill	in this information to identify your case:				
	otor 1 Joseph N. Futch		Check	c if this is:	
	otor 2 Gwendolyn D. Futch				ving postpetition chapter
	ouse, if filing)			·	the following date:
	ted States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIG	ian	N	MM / DD / YYYY	
	nown) 19-50262-tjt				
0	fficial Form 106J				
S	chedule J: Your Expenses				12/
info nui	as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this simber (if known). Answer every question.  t 1:  Describe Your Household	form. On the top of a	ny addition	nal pages, write y	our name and case
1.	Is this a joint case?				
	□ No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	<ul><li>■ No</li><li>☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses</li></ul>	for Separate Househo	old of Debto	or 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Son		15	■ Yes □ No
		Son		20	■ Yes
					□ No
					☐ Yes
					□ No □ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				00
Est	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless yourness as of a date after the bankruptcy is filed. If this is a suppolicable date.				
the	lude expenses paid for with non-cash government assistance it value of such assistance and have included it on <i>Schedule I:</i> Y ficial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$		1,250.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses  4d. Homeowner's association or condominium dues		4c. \$		100.00
	40 HOMEOWNER'S ASSOCIATION OF CONDOMINIUM DUES		40 ¥		(1) (1)(1)

Additional mortgage payments for your residence, such as home equity loans

Deb	otor 1	Joseph	N. Futch			
	otor 2		olyn D. Futch	Case n	umber (if known)	19-50262-tjt
•						
6.	Utilit 6a.		y, heat, natural gas	6	a. \$	225.00
	6b.		ewer, garbage collection		b. \$	80.00
	6c.		ne, cell phone, Internet, satellite, and cable services		c. \$	430.00
	6d.	Other. Sp			d. \$	0.00
7.			sekeeping supplies		7. \$	855.00
8.			children's education costs		8. \$	0.00
9.			dry, and dry cleaning		9. \$	150.00
10.		•	products and services	1	0. \$	150.00
11.			ental expenses		1. \$	100.00
12.			n. Include gas, maintenance, bus or train fare.		·	
			car payments.	1	2. \$	400.00
			t, clubs, recreation, newspapers, magazines, and books		3. \$	125.00
14.	Cha	ritable con	ntributions and religious donations	1	4. \$	750.00
15.		rance.				
			insurance deducted from your pay or included in lines 4 or 20.	4.5	- ¢	0.00
		Life insur		_	a. \$	0.00
		Health in Vehicle in			b. \$	0.00
					c. \$	0.00
40			surance. Specify:	15	d. \$	0.00
16.	Spec		include taxes deducted from your pay or included in lines 4 or 20.	1	6. \$	0.00
17			lease payments:		σ. ψ	0.00
			ments for Vehicle 1	17	a. \$	0.00
	17b.	Car payn	ments for Vehicle 2	17	b. \$	0.00
		Other. Sp		17	c. \$	0.00
	17d.	Other. Sp	pecify:	17	d. \$	0.00
18.	You	r payment	s of alimony, maintenance, and support that you did not report	t as		
	dedu	ucted from	n your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 10	6I). <sup>1</sup>	8. \$	0.00
19.			ts you make to support others who do not live with you.		\$	500.00
			ct Child Support		9.	
20.			perty expenses not included in lines 4 or 5 of this form or on S			0.00
			es on other property		a. \$	0.00
		Real esta			b. \$	0.00
			, homeowner's, or renter's insurance		c. \$	0.00
			ance, repair, and upkeep expenses		d. \$ e. \$	0.00
24			ner's association or condominium dues		·· · ·	0.00
۷۱.	Otne	er: Specify:	:		1. +\$	0.00
22.	Calc	ulate your	r monthly expenses			
	22a.	Add lines	4 through 21.		\$	5,115.00
	22b.	Copy line	22 (monthly expenses for Debtor 2), if any, from Official Form 106J	J-2	\$	
	22c.	Add line 2	2a and 22b. The result is your monthly expenses.		\$	5,115.00
00	0-1-		- mandala mat bu a a ma			,
23.			r monthly net income.	22	o •	F 447 00
			e 12 (your combined monthly income) from Schedule I.		a. \$	5,117.00
	∠3D.	Copy you	ur monthly expenses from line 22c above.	23	b\$	5,115.00
	230	Subtract	your monthly expenses from your monthly income.			
	230.		ilt is your <i>monthly net income</i> .	23	c. \$	2.00
		5 1000			L	
24.			t an increase or decrease in your expenses within the year afte			
			you expect to finish paying for your car loan within the year or do you expect e terms of your mortgage?	your mortgag	ge payment to incr	ease or decrease because of a
	_		o tomio di youi mongago:			
	■ N		Evaloin horo:			
		es.	Explain here:			

Fill in this inform	nation to identify your	case:		
Debtor 1	Joseph N. Futch			
	First Name	Middle Name	Last Name	
Debtor 2	Gwendolyn D. Fu	tch		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
Case number 1	9-50262-tit			
(if known)	<u> </u>			☐ Check if this is a amended filing

### Official Form 106Dec

# **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is N	OT an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119
Under penalty of perjury I declare that I have re	ead the summary and schedules filed with this declaration and
that they are true and correct.	·
that they are true and correct.  X /s/ Joseph N. Futch	X /s/ Gwendolyn D. Futch
that they are true and correct.	·

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Best Case Bankruptcy

		mation to identify you				
Debt	or 1	Joseph N. Futch	Middle Name	Last Name		
Debt	or 2	Gwendolyn D. F		Last Hame		
	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN		
Case	number	19-50262-tjt				
(if kno	wn)	•				☐ Check if this is an
						amended filing
Off	icial Fo	orm 107				
Sta	tement	t of Financial	<b>Affairs for Indivi</b>	duals Filing	g for Bankruptcy	4/1
Be as	complete	and accurate as possi	ible. If two married people	are filing together	, both are equally responsi	ible for supplying correct
inforr	nation. If n	nore space is needed,	attach a separate sheet to			s, write your name and case
numb	er (if know	n). Answer every que	stion.			
Part	1: Give	Details About Your Ma	arital Status and Where Yo	u Lived Before		
1. \	Nhat is voi	ır current marital statı	ıs?			
	vilut is you	ar ourrent maritar state				
I	Married	d				
[	☐ Not ma	arried				
2. [	During the	last 3 years, have you	lived anywhere other than	where you live no	ow?	
_	_		•	•		
[	□ No					
ı	Yes. Li	st all of the places you l	ived in the last 3 years. Do	not include where ye	ou live now.	
	Debtor 1 P	rior Address:	Dates Debtor lived there	I Debtor	2 Prior Address:	Dates Debtor 2 lived there
		untain View Dr.	From-To:	■ Same	e as Debtor 1	■ Same as Debtor 1
	Canton, N	ИІ 48188	06/2017-06/2	019		From-To:
_						
					a community property state , Puerto Rico, Texas, Washii	e or territory? (Community property
Siaics	and territor	nes include Anzona, Ca	illioitila, idalio, Lodisialia, iv	evada, New Mexico	, i deito Nico, Texas, wasiiii	igion and wisconsin.)
I	No					
I	☐ Yes. M	ake sure you fill out Sci	hedule H: Your Codebtors (0	Official Form 106H).		
Part	2 Expla	nin the Sources of You	r Income			
F	Fill in the tot	al amount of income yo	nployment or from operation or received from all jobs and have income that you recei	all businesses, incl		evious calendar years?
_	_	,	•	,	•	
[	□ No					
ı	Yes. Fi	III in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of inc	ome Gross income
			Check all that apply.	(before deducti		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Case number (if known) 19-50262-tjt

				Debtor 1				Debtor 2		
		Sources of income Check all that apply.	(bef	oss income fore deductions and lusions)	5	Sources of inc Check all that a		Gross income (before deductions and exclusions)		
		1 of curre	nt year until kruptcy:	■ Wages, commissions, bonuses, tips \$13,500.00		_	■ Wages, commissions, bonuses, tips		\$15,426.00	
				☐ Operating a business			[	☐ Operating a	business	
For last calendar year: (January 1 to December 31, 2018)		■ Wages, commissions, bonuses, tips \$24,000.00		_	■ Wages, componuses, tips	s, commissions, \$46,465.				
				☐ Operating a business				Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips		\$24,000.00	_	■ Wages, componuses, tips	missions,	\$13,526.00
				☐ Operating a business			[	☐ Operating a business		
<ul> <li>Did you receive any other income during this year of Include income regardless of whether that income is the and other public benefit payments; pensions; rental incominings. If you are filing a joint case and you have income the List each source and the gross income from each source.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>					erest; div t you rec	vidends; money colle eived together, list it	ected t only	from lawsuits; once under De	royalties; and btor 1.	
				Dalitan 4				D-1:1 0		
				Debtor 1 Sources of income Describe below.	eac (bef	oss income from th source fore deductions and lusions)	5	Debtor 2 Sources of incomplete Describe below.		Gross income (before deductions and exclusions)
Part 3:	List	Certain Pa	yments You	Made Before You Filed for	r Bankrı	uptcy				
Are either Debtor 1's or Debtor 2's debts primarily consumer debts?  No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by individual primarily for a personal, family, or household purpose."  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?  No. Go to line 7.  Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.  * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.  Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?  No. Go to line 7.  Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to attorney for this bankruptcy case.						ne total amount you nd alimony. Also, do				
C	reditor'	s Name and	l Address	Dates of paym	nent	Total amount	ı	Amount you	Was this n	ayment for
J	. 30.101	. tamo and		Dates of paying	.3	paid	•	still owe	παο τιπο μ	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

**Explain what happened** 

■ No

Yes. Fill in the details.

Creditor Name and Address

Describe the action the creditor took

Date action was taken

Amount

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

property

Debt Debt	tor 1 tor 2	Joseph N. Futch Gwendolyn D. Futch		Case number	(if known)	19-50262-t	jt
		n 1 year before you filed for bankr -appointed receiver, a custodian, c		as any of your property in the possession of an er official?	assignee	for the bene	fit of creditors, a
	_	No Yes					
Part	5:	List Certain Gifts and Contribution	ns				
	_	n 2 years before you filed for bank	ruptcy, o	did you give any gifts with a total value of more t	han \$600	per person?	,
	_	Yes. Fill in the details for each gift.					
		s with a total value of more than \$6 person	00	Describe the gifts	Dates the gif	you gave ts	Value
		on to Whom You Gave the Gift and ress:	d				
	_	<b>n 2 years before you filed for bank</b> No	ruptcy, o	did you give any gifts or contributions with a total	al value o	f more than	\$600 to any charity?
		Yes. Fill in the details for each gift or			_		Value
	Gifts or contributions to charities that total more than \$600 Charity's Name			Describe what you contributed		Dates you contributed	
	St. J	ress (Number, Street, City, State and ZIP Coo Joseph Tabernacle 41 West Chicago	de)	Tithes	montl	nly	\$750.00
		roit, MI 48228					
•	or ga —	n 1 year before you filed for bankri mbling? No	uptcy or	since you filed for bankruptcy, did you lose any	thing bed	ause of thef	t, fire, other disaster
	•	Yes. Fill in the details.					
		cribe the property you lost and the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date o loss	f your	Value of property lost
		5 Cadillac SRX, vehicle was lled in an accident	vehic loss o	le was insured, insurance paid for the of the car, there is currently a pending nal injury action	9/2018	8	\$19,231.00
Part	7:	List Certain Payments or Transfer	rs				
	cons	ulted about seeking bankruptcy or	preparii	d you or anyone else acting on your behalf paying a bankruptcy petition? s, or credit counseling agencies for services require			ty to anyone you
		No					
	_	Yes. Fill in the details.					
	Addı Ema	il or website address		Description and value of any property transferred	•	ayment isfer was	Amount of payment
	Freç	on Who Made the Payment, if Not go & Associates - The Bankrup		Attorney Fees	6/10/2	019	\$100.00
	Dea	43 Joy Road rborn Heights, MI 48127 olaw@aol.com					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you I  No	or to make payments			or transfer any proper	ty to anyone who	
	☐ Yes. Fill in the details.						
	Person Who Was Paid Address	Description and variansferred	Description and value of any property transferred			Amount of payment	
				_			
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers mad include gifts and transfers that you have already	siness or financial affa e as security (such as the	irs? ne granting of a s				
	No						
	☐ Yes. Fill in the details.						
	Person Who Received Transfer Address		property transferred payn		any property or s received or debts schange	Date transfer was made	
	Person's relationship to you						
19.	. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No						
	Yes. Fill in the details.						
	Name of trust	Description and va	alue of the prop	erty transfer	red	Date Transfer was made	
Par	8: List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and Sto	rage Units		mado	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associa  No Yes. Fill in the details.	other financial accoun	ts; certificates	of deposit; sl	•	, ,	
		ast 4 digits of account number	Type of account instrument	cle	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had according Address (Number, State and ZIP Code)		Describe the	contents	Do you still have it?	
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	year before y	ou filed for bankruptc	y?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h		Describe the	contents	Do you still have it?	
		Address (Number, St State and ZIP Code)	reet, City,				

Official Form 107

Debtor 1 Joseph N. Futch Debtor 2 Gwendolyn D. Futch

Case number (if known) 19-50262-tjt

Par	t 9: Identify Property You Hold or Control for S	Someone Else						
23.	Do you hold or control any property that someo for someone.	ne else owns? Include any prope	rty you borrowed from, are storing fo	r, or hold in trust				
	No							
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Par	tt 10: Give Details About Environmental Informa	ation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these substances.	r, land, soil, surface water, ground	- ·					
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	law, whether you now own, operate,	or utilize it or used				
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic	substance,				
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	n they occurred.					
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	e under or in violation of an environm	ental law?				
	■ No □ Yes. Fill in the details.							
	Name of site	Governmental unit	Environmental law if you	Date of notice				
	Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	■ No							
	Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
-	Olive Botelle Alexed Very Business on Con-							
Par	t 11: Give Details About Your Business or Con	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy, o	ny of the following connections to an	y business?					
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or	equity securities of a corporation						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 Joseph N. Futch otor 2 Gwendolyn D. Futch		Cas	e number ( <i>if known</i> )	19-50262-tjt		
	■ No. None of the above applies. Go to I □ Yes. Check all that apply above and fill		or each business.				
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of Name of accountant		Employer Identifing Do not include Signature Dates business	ocial Security number or ITIN.		
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.  No Yes. Fill in the details below.	tcy, did you give a final	ncial statement to an	yone about your b	ousiness? Include all financial		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued					
I ha are with	t 12: Sign Below we read the answers on this Statement of Firerue and correct. I understand that making a a bankruptcy case can result in fines up to .S.C. §§ 152, 1341, 1519, and 3571.	false statement, conce	ealing property, or ob	taining money or			
	Joseph N. Futch seph N. Futch	/s/ Gwendo Gwendolyn	lyn D. Futch D. Futch				
Sig	nature of Debtor 1	Signature of	Debtor 2				
Da	e <u>July 22, 2019</u>	Date July	22, 2019				
Did ■ N		ent of Financial Affairs	for Individuals Filing	for Bankruptcy (0	Official Form 107)?		
<b>=</b> 1	you pay or agree to pay someone who is no lo es. Name of Person Attach the <i>Bankru</i>				al Form 119).		